

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	22200	5-3-00
O.I.P.E. CLASSIFIER		19	5 9 00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	h.w.	64830	7-11

### INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
- (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Date
Final Original	
1	5/1/00
2	5/1/00
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Claim	Date
Final Original	
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99	5/1/00
100	5/1/00

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
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